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|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------|
| SERIAL NUMBER<br>10/671,820 | FILING DATE<br>09/26/2003<br><br>RULE | CLASS<br>606 | GROUP ART UNIT<br>3733 | ATTORNEY DOCKET NO.<br>DEP5086 |
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 12/17/2003

| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY<br>IN | SHEETS<br>DRAWING<br>18 | TOTAL<br>CLAIMS<br>19 | INDEPENDENT<br>CLAIMS<br>3 |
|---|--|---------------------------|-------------------------|-----------------------|----------------------------|
| Verified and Acknowledged<br>Examiner's Signature           | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Initials |                           |                         |                       |                            |

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## TITLE

Radial impaction bone tamp and associated method

|                               |   |   |
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| FILING FEE<br>RECEIVED<br>750 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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